Conf. No.: 9582

10/561,152

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Application Number

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

SUBMITTED BY

Name (Print/Type) Gerald M. Murphy, Jr.

Signature

CEE TO A NOMITTAL

For FY 2009	For FY 2009						December 16, 2005		
Applicant claims small entity status. See 37 CFR 1.27   Art Unit   1796					7 11 27 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
At Unit   1798   At U	Applicant claims small entity status See 37 CER 127								
METHOD OF PAYMENT (check all that apply)	<del></del>			7tit Oliit		1796			
Check Credit Card Money Order None Other (please identify):    Deposit Account Deposit Account Number; 02-2448   Deposit Account Number; 02-24	TOTAL AMOUNT OF PAYMENT (\$) 1,650.00			Attorney Docket No. 017		0171-1250PUS1			
Deposit Account Deposit Account Namer 02-2448  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Charge fee(s) indicated below, except for the filling fee  Examination on PTO-2038.  Examinat	METHOD OF PAYMENT (check all that apply)								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below. except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee   Charge fee(s) indicated below, except for the filling fee of the filling fee o									
Charge fee(s) indicated below									
Charge any additional locks) or underpayments of fee(s)   Credit any overpayments									
WARNING: Information on this form was become public. Gredit card information should not be included on this form. Provide credit card information and authorization on PTO-2693k.    TEEE CALCULATION									
WARNING: Information on this form may become public. Credit card information and authorization on PTO-2038.   FEE CALCULATION									
Test   Calculation   Fee   Sample	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card								
Fill No FIES   Small Entity   Fee (3)   Fee (5)   Fee (6)   Fee (5)   Fee (6)   Fee									
Fill No FIES   Small Entity   Fee (3)   Fee (5)   Fee (6)   Fee (5)   Fee (6)   Fee	1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
Application Type   Fee (5)   Fee (6)   Fee (	FILING FEES SEARCH FEES EXAMINA								
Design   220   110   100   50   140   70	Application Type	Fee (\$)		Fee (\$		Fee		Fees Pald (\$)	
Plaint   220   110   330   165   170   85	Utility	330	165	540	270	22	0 110		
Reissue   330   165   540   270   650   325	Design	220	110	100	50	14	0 70		
Provisional 220 110 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Plant	220	110	330	165	17	0 85		
2 EXCESS CLAIM FEES	Reissue	330	165	540	270	65	0 325		
Fee   Security   Fee	Provisional	220	110	0	0		0 0		
Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Each independent claim over 4 (including Reissues)  It could be considered and including Reissues)  It could be considered and including Reissues)  It could be considered and including paid for it greater than 2.  It could be considered and including paid for it greater than 2.  It could be considered and including paid for it greater than 3.  It could be considered and including paid for it greater than 3.  It could be considered and including paid for it greater than 3.  APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof including considered and including and 37 CFR 1.165(a).  It could sheets in Earth Sheets Sea 50 U.S. C. 4(a)(1/G) and 37 CFR 1.165(a) in thereof including considered and in									
Each independent claim over 3 (including Reissues)  Multiple dependent claims  Multiple dependent claims  Multiple dependent claims  Total Claims  Fee (5)  130 0 195  0.00  147 + sibpeat number of lests and park of r. if greater than 20.  Indep. Claims  -3 or HP = 0  3 or HP = 0  -3 or HP = 0  -3 or HP = 10  -4 or HP =									
Multiple dependent claims    Total Claims   Extra Claims   Fee (\$)   Fee Paid (\$)   Multiple Dependent Claims									
- 20 or IPP = 0								195	
HP = highest number of total dames paid for, it grouter ham 20.								ependent Claims	
Indep. Claims				=	0.00		Fee (\$)	Fee Paid (\$)	
-3 or HP = 0 x = 0.00    HP = highest number of independent dations paid for, if greater than 3.   A.PPLICATION SIZE FEE   The specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S. C.4 ((a) (1/G) and 37 CFR 1.16(c).   Total Sheets   Extra Sheets   Number of each additional 50 or fraction thereof   Fee (15)   Fee Paid (5)     On the FeE(S)   On the Paid (5)   On the Paid (5)   On the Paid (5)   On the Paid (5)     On the FeE(S)   On the Paid (5)   On the Paid (5)   On the Paid (5)   On the Paid (5)     On the FeE(S)   On the Paid (5)   On the Paid (6)	Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 4((a)(1/G)) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof per seed of the seed o	- 3 or HP =	0	x:	_					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 3 C/R1. 52(c)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 C/R 1.16(s).    Solid Sheets									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(d) and 37 CRR 1.16(s).  Total Sheets  Stra Sheets   Sumber of each additional 50 or fraction thereof   Fee (5)   =   Fee Paid (5)    ON THER FEE(S)   On the properties of the pr	If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
Total Sheets   Extra Sheets   O   750   Number of seich additional 80 or fraction thereof   Fee (5)   EeR Paid (5)    4. OTHER FEE(S)   Non-English Specification, \$130 fee (no small entity discount)   Fee Paid (5)    Fee Paid (5)   Fee Paid (6)    Fee Paid	sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Non-English Specification, \$130 fee (no small entity discount)	<u>Total Sheets</u> <u>Extra Sheets</u> <u>Number of each additional 50 or fraction thereof</u> <u>Fee (\$)</u> <u>Fee Pald (\$)</u>								
Other (e.g., late filing surcharge): Notice of Appeal, Petition for Extension of Time 1,650.00	Non-English Specific							Fees Paid (\$)	
	Other (e.g., late filing	surcharg	(c): Notice of Appeal	Petitio	on for Extension of	Time		1,650.00	

This collection of information is required by 37 PR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPT 0 to process) an application. Confidentially governed by 35 U.S.C. 122 and 3 C CPR 1.14. This collection is estimated to take 30 minutes to complete. Including gathering, preparing, and submitting the completed application from to the USPT 0. Time with very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Paternam of Trademack Office, U.S. Department of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. Expertment of Commerce, P.O. 90x 1450, Alexandria, V.2.2151-44(20, U.S. Expertment of Commerce, ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Registration No. 28977

(Attorney/Agent)

Telephone 703-205-8000

Date June 21, 2010